ARKANSAS DEPARTMENT OF HUMAN SERVICES

Division of Medical Services
Pharmacy Program

P.O. Box 1437, Slot S415 · Little Rock, AR 72203-1437
501-683-4120 · Fax: 501-683-4124 or 1-800-424-5851

ARKANSAS MEDICAID DUR/DRC BOARD QUARTERLY DRUG UPDATE
January 17, 2024 8:30 A.M. – 12:30 P.M.
VIRTUAL ZOOM MEETING LINK
https://us02web.zoom.us/j/85458850530?pwd=ZzdiZjg5REtaNVR3L1Z0OFJHNS80dz09
Passcode: 052709
Or One tap mobile :
+13126266799,85458850530# US (Chicago)
+14702509358,85458850530# US (Atlanta)
Or Telephone:
Dial (for higher quality, dial a number based on your current location):
+1 312 626 6799 US (Chicago)
+1 470 250 9358 US (Atlanta)
+1 346 248 7799 US (Houston)
+1 602 753 0140 US (Phoenix)
+1 720 928 9299 US (Denver)
Webinar ID: 854 5885 0530

****TENTATIVE AGENDA IS SUBJECT TO CHANGE****

I. OUTSIDE SPEAKERS

DUR/DRC Board Bylaws, Section 7.02 Outside Speakers -- Outside speakers with clinical or scientific credentials or patient experience pertinent to a product or topic that is posted on the upcoming DURDRC Board meeting agenda may request to speak on that product or topic. Requests to speak at the DUR/DRC Board meeting must be made in writing to the DUR Chairperson at least two (2) weeks before the DUR/DRC Board meeting date, and should include:

1. The speaker's name, title, relevant credentials, and organization;
2. Contact information for the speaker including address, telephone number, and email;
3. The agenda item(s) which the speaker intends to address;
4. Prepared comments; and
5. Any educational materials for Board members in advance of the meeting.

This information shall be included in information sent to Board members two (2) weeks prior to the Board meeting. Presentations or public comments given at the DUR/DRC Board meeting are limited to a total of six (6) minutes per drug, which may be shared by multiple speakers. This time limit does not include responses to any questions raised by DUR/DRC Board members during the course of the meeting.

A copy of the proposed criteria for the specific agenda item on which an individual requests to speak may be requested from the Chairperson three (3) weeks prior to the DUR/DRC Board meeting. The information will be in draft form and may be changed by the DUR/DRC Board prior to being finalized. As such, the draft criteria should not be shared with clinicians or patients.

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II. UNFINISHED / OLD BUSINESS AND GENERAL ORDERS / AND PROPOSALS TO REVISE PREVIOUS CRITERIA

A. ANNOUNCEMENTS
B. APPROVAL OF THE MINUTES FROM THE PREVIOUS MEETING.
C. UPDATE ON SYSTEM EDITS, IMPLEMENTATIONS, OR FOLLOW-UP ITEMS.
    1) Follow-up items from October 18, 2023 DUR/DRC Board: Multiple drugs were not discussed during the October meeting due to a technical issue. Those drugs will be included on this agenda.
    2) Implementation information from October 18, 2023 DUR/DRC Board
D. GENERAL INFORMATION
E. PDL CLASS REVIEW WITHOUT CRITERIA **(see specific medications on page 3)**
    1) Ophthalmic antibiotics
    2) Otic antibiotics
F. PDL CLASS REVIEW WITH CRITERIA **(see specific medications on page 3)**
    1) Erythropoiesis Stimulating Agents
    2) Urea Cycle Disorder Agents
G. PROPOSED CHANGES TO EXISTING CRITERIA and EDITS, INCLUDING POINT OF SALE (POS) CRITERIA, MANUAL REVIEW PA CRITERIA, OR CLAIM EDITS: None

III. NEW BUSINESS

A. PROPOSED NEW CLINICAL POINT OF SALE CRITERIA WITH OR WITHOUT ADDITIONAL CLAIM EDITS:
B. MANUAL REVIEW PROPOSED CRITERIA WITH OR WITHOUT ADDITIONAL CLAIM EDITS:
    1) JESDUVROQ® (daprodustat) tablet (will be discussed with erythropoiesis stimulating agents)
    2) OLPRUVA™ (sodium phenylbutyrate) pack (will be discussed with the urea cycle disorder agents)
    3) FUROSCIX® (furosemide) injection
    4) IMCIVREE® (setmelanotide) solution
    5) VYJUVEK™ (beremagene geperpavec-svdt) gel
    6) TARGETED IMMUNOMODULATOR CRITERIA FOR GOUT FLARES
    7) SOHONOS™ (palovarotene) capsule
    8) OJJAARA (momelotinib) tablet
    9) XDEMVY™ (lotilaner) drops
    10) OPFOLDA™ (miglustat) capsule
    11) LIKMEZ™ (metronidazole) suspension

C. PROPOSED NEW CLAIM EDITS (QUANTITY, DAILY DOSE, ACCUMULATION, GENDER, AGE): None
D. ProDUR REPORT UPDATE
E. RDUR REPORT UPDATE

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PDL THERAPEUTIC CLASSES UNDER REVIEW
Otic Antibiotics: acetic acid solution, acetic acid-hydrocortisone drops, Ciprodex® suspension, ciprofloxacin drops, ciprofloxacin/dexamethasone suspension, ciprofloxacin/fluocinolone solution, Cipro® HC suspension, Cortisporin-TC® suspension, neomycin/polymyxin/HC suspension/solution, ofloxacin drops, Otovel® solution
Ophthalmic Antibiotics: Azasite® solution, bacitracin ointment, bacitracin/polymyxin B ointment, Besivance® suspension, Ciloxan® ointment, ciprofloxacin solution, erythromycin ointment, gatifloxacin solution, gentamicin solution, moxifloxacin solution, Natacyn® suspension, neomycin/polymyxin/bacitracin ointment, neomycin/polymyxin/hydrocortisone suspension, neomycin/polymyxin/gramicidin solution, neomycin/polymyxin/bacitracin/HC ointment, Ocuflox® solution, ofloxacin solution, Polycin® ointment, polymyxin B/trimethoprim solution, sulfacetamide ointment, sulfacetamide solution, tobramycin solution, Tobrex® ointment, Vigamox® solution, Zymaxid® solution
Erythropoiesis Stimulating Agents (epoetin and other MOAs): Aranesp® vial, Aranesp® syringe, Epogen® vial, Jesduvroq™ tablet, Mircera® syringe, Procrit® vial, Reblozyl® vial, Retacrit® vial
Urea Cycle Disorder Agents: Buphenyl® tablet, Buphenyl® powder, Carbaglu® tablet, carglumic acid tablet, Olpruva™ packet, Pheburane® granules, sodium phenylbutyrate tablet (generic for Buphenyl®), sodium phenylbutyrate powder (generic for Buphenyl®)